

Reflections

Doctoral research work and work of care: reflections in times of a pandemic

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In the face of the pandemic, we have been forced to adopt strategies in order to balance our doctoral work at the same time as caring for our families. As the digital turn has pervaded both social and academic milieus, we consider the potentials and shortcomings of remote interactions and approaches and how they have impacted our work and personal lives. We focus on the challenges of balancing paid work and the unpaid work of care, as well as considering potential changes to the concept of care in terms of building a caring culture.

Keywords: Covid-19, family/work balance, caring, caring masculinities, academia, gender

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As lockdown became the new normal, there was a “resurgence of mystificatory images of the heteronormative private household” (Kay 2020, 1). The idea that home is neither a material reality nor the safest place for everyone, seemed to be downplayed. The contradictions and inequalities of the social world were clearly revealed by the pandemic, but parents encouraged their children to draw rainbows and stick them on windows, a sign of hope to the outer world together with the collective wishful thinking slogan, “everything will be fine” (*vai ficar tudo bem* in Portugal, *andrà tutto bene* in Italy, the countries where we reside). In a more realistic tone, other voices pointed out that the pandemic was exposing “fallacies and falsehoods everywhere: the lie that free markets can deliver healthcare for all. The fiction that unpaid care work is not work, the delusion that we live in a post-racist world, the myth that we are all in the same boat” (Guterres, cited in McVeigh 2020).

In the context of the pandemic, with all the psychological distress, paranoia and tiredness due to the lack of downtime between work and family, we struggled to advance in our doctoral research work, as we felt the demands of juggling family and paid work tasks had reached unprecedented levels of hardship. Most carers during this time reported feeling overburdened and having to work extra hours

at night to comply with the multiple family/work demands (Manzo & Minello 2020), and we felt the same way. Although the Portuguese Foundation for Science and Technology (FCT)¹ guaranteed a two-month prorogation of its research grants, which momentarily contributed to easing the feeling of anxiety of the three of us who have such grants, the impact of the pandemic on the lives and work of people extended well beyond that period. Madelon, on the contrary, does not have a scholarship and works online as a psychotherapist supporting people in dealing with their suffering during the pandemic, as well as providing online classes for the elderly, helping them to deal with loneliness.

In this article we focus on our experiences as female Ph.D. candidates in Anthropology (Catarina, Federica and Luísa) and Sociology (Madelon), to discuss the challenges we have faced as doctoral researchers during the pandemic. How did the effects of the pandemic impact our work? We also consider the fact that new actors, for example, young men, have had to assume the role of carer for their families in the context of the pandemic and have looked at how this can contribute to a change in perspective regarding caring masculinities.

Research work and the work of care

In situ work interrupted...

During lockdown, part of the world was brought to a standstill and social distancing became mandatory. This situation posed challenges to our doctoral research. The first reaction to the pandemic was the closing down of institutions. We were forced to cease our regular visits to the university, libraries and archives. Confined to our homes, we had to abandon the social interactions that are important contexts of scientific stimulation – conferences, tutor meetings and lunch breaks with colleagues who provide unexpected input and brainstorming opportunities. Fieldwork was forcibly interrupted, too, as mobility and social contact were legally constrained and reduced to the family household. Anthropological work, the art of presence and proximity, was obviously compromised. Lockdown took its toll as we found ourselves deprived of any social contacts except with closest family members (partners and children), the only space for interaction being a computer or mobile screen.

... resumed as online work – the digital turn

While the first reaction was to stop research work, this did not last long. Disciplinary debates on approaches to fieldwork (Lupton 2020) and the role of anthropology in health emergencies² urged anthropologists to critically engage with the current situation. In some cases, the impact of the pandemic had a direct consequence on our research subjects. The setting proved valuable to Catarina's argument, as it exacerbated and exposed the conditions of obstetric violence and therefore, incorporating the effects of the pandemic in her research seemed inevitable. Madelon's online practice as a psychotherapist at this time, has influenced her perception of how caring practice by young men could impact the construction of a new caring identity. Inspired by her experience, she decided to focus on a review in research methodology with young men. When the professional dimension is a pillar of self-perceived identity, carrying on with work can help the person feel balanced. Both Federica and Luísa felt the need to carry on with their work for a sense of continuity. The strategy they found was resorting to online interviews. These internet-mediated communications meant that the interviewees had to be instructed on the optimal conditions for the interaction, avoiding noisy environments and bad internet connections. This implied extra energy and attention compared to standard interviewing settings, due to the need to monitor additional elements that might shape interactions.

Many database administrators provided their archives for free, offering free access to scientific literature that is usually paid for. An increasing number of activities eventually resumed online. This proved to be advantageous for Catarina and Federica, who do not live in Lisbon where our institute is located, and who are already used to connecting remotely to classes and seminars when such are

provided. Also, not being the only one connecting remotely when everyone else is attending in person, improved the quality of the experience from a technical point of view.

However, it was not long before the enthusiasm vanished. Online social interactions have advantages and disadvantages, but they definitely do not replace face-to-face interactions. It is especially tiring because of the extra work the brain is forced to do in order to interpret basic communication cues (Jiang 2020). It relies on the ownership of state-of-the-art technological devices and a good internet connection. For Catarina, living in a rural area where the internet connection is unstable and having to assist with the schoolwork of a 6-year old child having daily classes on Zoom, there was not much energy left for online work. Luísa also found it difficult to follow her 12-year old daughter's articulated learning of music, on multiple digital platforms for classes and exercises.

Caring for others during confinement

Feminist social movements have long drawn attention to the value of the “reproductive” work of care, without which other types of “productive” work would not be possible (Austin *et al.* 2020). In this time of crisis, the importance of the work of care has once again become clear. During the pandemic, social scientists and news reports exposed the inequity underlying the work of care, which is gendered (Cunha 2020). A Facebook post pointing out the issue read, “The economy is not closed. Everyone is cooking, cleaning, and taking care of their loved ones. It's just not valued by economists because it is normally unpaid women's work” (O'Reilly 2020, 22–23).

Balancing our research work with the work of care was difficult for us all. Luísa's partner worked at a hospital and so she decided to move to her parents' house to avoid the risk of contagion. The menacing feeling of bringing contagion from the outer world into the home also affected Federica. Every day, when her husband came home from work, she would have to ensure her small children refrained from jumping onto his lap before he changed clothes and disinfected himself, as the doorstep was a liminal medicalized frontier. Catarina's partner is a freelance musician, and all his work (concerts and music therapy sessions) was cancelled. This meant he stayed at home all day and was able to take on most of the childcare and housework. However, being unemployed was also a source of financial stress for the household. With two children of different ages, Catarina wanted to take care of them alongside her partner and reduced her working hours in order to do so. Madelon's partner was working abroad and was not allowed to return to Portugal for some months. She did her best to care for herself and her family living abroad. Despite being alone with her 12-year old daughter to care for, Luísa made a conscious effort to meet writing deadlines to help her remain focused. Federica also felt that working contributed to maintaining her mental balance. Although she was responsible for all the work of care when her husband was out at work, she managed to be productive by writing when he was off duty.

Caring masculinities

In the context of her psychotherapeutic support work, Madelon supported Jaime³, a 19-year old man who was responsible for caring for his younger sister, replacing their parents, who were isolated in another house as a result of Covid-19 contagion. The representation of caring practice that Jaime had experienced as a child brought him a new sense of responsibility and awareness of what he was able to do and what he failed to do because of his moral premises regarding and performing gender norms. This awareness led Jaime to review his values, guided by more positive, relational and interdependent emotions, creating the possibility of a new male identity, in the context of “caring masculinities” (Elliot 2016, 246; Cunha *et al.* 2018).

Catarina also involved her 6-year old son in the care for his 2-year old sister, more so than before, and he was very quick to take on this role of carer. Our partners/husbands are committed fathers who perform the tasks of care and it is noticeable how having a masculine model of care in the home shapes the predisposition of children to consider the work of care as a male task just as much as a female one.

Closing thoughts

Amid the digital turn, exacerbated by the setting of the pandemic, the advantages of 21st century technology for privileged people such as ourselves has become evident, but so have the shortcomings of such technology. We were able to advance in our work thanks to digital communication, but at what cost? The three of us, who had completed the bulk of the fieldwork before the outbreak, were relieved, as we found that in-presence interaction could never be replaced by online social interaction. Madelon reshaped her research project in order to consider the setting of the pandemic and Catarina incorporated it, as it proved valuable data for her research topic. Luísa and Federica both felt that keeping up the rhythm of work helped them maintain their routines and ensure some feeling of continuity. For Catarina, the work deadlines were stressful, as she found it difficult to respond to both her children's needs and work demands. The three of us who have children, sometimes felt that we were failing at both jobs (research work and the work of care).

The moral regime normalized during the pandemic, whereby social contact was redefined as something inherently dangerous, was hard for all of us to witness and experience. The perception of an invisible danger led to a general "othering" of the bodies of others, becoming a source of tension. Being with others became an exposure to risks and personal protection devices became part of everyday life. The concept of "cross-contamination", with which Federica was acquainted due to her research on body suspension – the act of rigging a human body to hang from implements that have been placed through temporary perforations in the skin – suddenly became common knowledge, and the main subject of conversations.

The pandemic once again made clear the need to reflect upon the climate crisis and to acknowledge our interpersonal and interspecies co-dependence. The student climate strike movement has shown how the younger generations can play an active role in bringing about change and influencing older generations (cf. two Reflections in this issue of *Fennia* on youth climate activism). We too felt we have a lot to learn from our children. During lockdown, we reinforced our ties with our children, by spending a great deal of time with them and engaging in multiple tasks together. In some cases, the Covid-19 pandemic brought about a reorganization of the distribution of domestic chores and the practice of care into the lives of people who traditionally do not assume the role of carer. Could this change in behaviour, resulting from the adaptation to a crisis, contribute to a shift towards the normalization of caring masculinities and a generalized culture of care?

Notes

¹ *Fundação para a Ciência e a Tecnologia* (FCT) of the Ministry of Science, Technology and Higher Education (MCTES).

² See the Anthropological Responses to Health Emergencies (ARHE), a Special Interest Group of the Society for Medical Anthropology (<http://arhe.medanthro.net/call-to-action/>).

³ Not his real name, for ethical and privacy reasons.

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